A study to Investigate the efficacy and safety of Depemokimab compared with placebo in Adults with Hypereosinophilic Syndrome (HES)

Estado	**Tipo de Participantes**	**Rangos de Edad**
Reclutando	No aportado	Mayores de 64 , Adultos (18-64 años)
Género	**Fases**	**Participantes esperados**
Ambos	Fase III	84
Resultados	**Bajo nivel intervención**	**Enfermedad rara**
Sin resultados	No	Si
Cobertura geográfica	**Ámbitos del ensayo**	**Terapia avanzada**
Sin determinar	tratamiento, seguridad, eficacia, farmacocinética, farmacodinamica, farmacogenética, farmacogenómica	NO

Información

Identificador
2023-510346-25-00 (CTIS)

Cod. Protocolo
217013

Transicionado 2021-005692-39

Área terapéutica
Enfermedades [C] - Hematología [C15]|

Enfermedad investigada
Hypereosinophilic Syndrome (HES)

Título Científico
A Randomized, Double-blind, Placebo-controlled Study to Investigate the Efficacy and Safety of Depemokimab in Adults with Hypereosinophilic Syndrome (HES)

Justificación

No aportado

Objetivo Principal

To evaluate the efficacy of depemokimab subcutaneous (SC) versus placebo in participants with uncontrolled HES receiving standard of care (SoC)

Variables de Evaluación Primaria

Frequency of HES flares during the 52-week study intervention period

Momentos temporales de evaluación primaria

No aportado

Objetivo Secundario

To assess supportive evidence of the efficacy of depemokimab SC versus placebo on multiple clinical outcomes in participants with uncontrolled HES receiving SoC

Variables de Evaluación Secundaria

Time to first HES flare (days)
At least one HES flare during the 52-week study intervention period
Change from Baseline to Week 52 in Brief Fatigue Inventory (BFI) item 3 weekly average score.
Change from Baseline to Week 24 in Patient Reported Outcomes Measurement Information System (PROMIS) Fatigue Short Form (SF) 7a score

Momentos temporales de evaluación secundaria

No aportado

Criterios de Inclusión

Participant must be 18 years of age, at the time of signing the informed consent. Participants who are 40 kg at Screening Visit 1. Participants who have a documented diagnosis of HES prior to Visit 2. HES diagnosis is based on: blood eosinophilia of >1,500 eosinophils/L on at least 2 occasions at 1 month interval, without a discernible non haematological secondary cause, and signs or symptoms of organ involvement and/or dysfunction that can be

directly related to eosinophilia Flare history: A history of 2 or more HES flares within the past 12 months prior to Visit 1. Historical HES flares are defined as documented HES-related worsening of clinical symptoms or blood eosinophil counts requiring an addition or escalation in OCS or cytotoxic/immunosuppressive therapy. At least 1 HES flare within the past 12 months must not be related to a decrease in HES therapy during the 4 weeks prior to the flare. Male or female participants A female participant is eligible to participate if she is not pregnant or breastfeeding, and one of the following conditions applies: Is a woman of non-childbearing potential (WONCBP) as defined in protocol Section 10.4, Appendix 4 OR Is a woman of childbearing potential (WOCBP) and using a contraceptive method that is highly effective, with a failure rate of <1%, as described in, Section 10.4, Appendix 4, from at least 14 days prior to the first dose of study intervention until at least 30 weeks after the last administered dose of study intervention. The Investigator should evaluate the potential for contraceptive method failure (e.g., noncompliance, recently initiated) in relationship to the first dose of study intervention. Capable of giving signed informed consent as described in protocol Section 10.1 which includes compliance with the requirements and restrictions listed in the ICF and in this protocol.

Criterios de Exclusión

HES disease manifestations which in the opinion of the Investigator may put the participant at unacceptable risk from study participation or confound interpretation of efficacy or safety data. Specific consideration should be given to the participant's ability to comply with protocol requirements, including the list of prohibited therapies; exclusion criteria no. 13 - 16.
COVID-19: Participants that, according to the Investigator's medical judgment, are likely to have active COVID-19 infection should be excluded. Participants with known COVID-19 positive contacts within the past 14 days must be excluded for at least 14 days following the exposure during which the participant must remain symptom-free.
Other concurrent medical conditions that may affect the participant's safety: Participants who have known, pre-existing, clinically significant endocrine, autoimmune, metabolic, neurological, renal, gastrointestinal, hepatic, haematological, respiratory, cardiac or any other system abnormalities that are not associated with HES and are uncontrolled with standard treatment.
Hypersensitivity: Participants with an allergy/ intolerance to a monoclonal antibody or biologic, or any of the excipients of the investigational product in protocol Section 6.1.
Monoclonal antibodies (mAb) targeting IL-5/5R: Participants who have a previous documented failure with anti-IL-5/5R therapy, based on investigator's discretion.
mAbs: Participants who have received mAb within 30 days or 5 halflives, whichever is longer, prior to Visit 1 (other than approved mAbs for the treatment of COVID-19). If a participant has been treated with and responsive to biologics for HES, the participant should not stop the treatment for study eligibility purpose.
Non oral systemic corticosteroids: Participants who have received intravenous, intramuscular, or subcutaneous corticosteroids within 4- weeks prior to Visit 2.
Investigational medications/clinical study: Participants who have received treatment with an investigational agent within 30 days or 5 drug half-lives whichever is longer, prior to Visit 1. The term "investigational" applies to any drug not approved for sale in the country in which it is being used or investigational formulations of marketed products. Participants who are currently participating in any other interventional clinical study.
FIP1L1-PDGFR Status: Participants who test positive for the FIP1L1-PDGFR fusion gene (i.e., participants with the myeloid-variant HES are excluded). Blood sampling is required for all participants at Screening (Visit 1) for this test unless the documented result is available.
ECG Assessment: QTcF 450 msec or QTcF 480 msec for participants with Bundle Branch Block at Screening Visit 1.
OCS responsiveness: Participants who are not responsive to OCS based on clinical response or blood eosinophil counts in the opinion of the Investigator.
Infection: Participants with chronic or ongoing active infections requiring systemic treatment. Participants with a pre-existing parasitic infestation within 6 months prior to Visit 1.
Alcohol/Substance Abuse
Pregnancy
Participants who have known evidence of lack of adherence to controller medications and/or ability to follow physicians recommendations.
Immunodeficiency: Participants with a known immunodeficiency (e.g., HIV), other than that explained by the use of oral corticosteroid (OCS) or other therapy taken for HES.
Malignancy: Participants with a history of or current lymphoma. Participants with current malignancy or previous

history of cancer in remission for less than 5 years prior to Visit 1. Participants that had localized carcinoma (i.e., basal or squamous cell) of the skin which was resected for cure will not be excluded. Participants with a haematologic malignancy with hypereosinophilia in which HES is not the primary diagnosis, e.g., chronic myeloid leukaemia, myelodysplastic syndrome, chronic eosinophilic leukaemia-not otherwise specified.
Liver disease: Cirrhosis or current unstable liver or biliary disease per Investigator assessment defined by the presence of ascites, encephalopathy, coagulopathy, hypoalbuminaemia, oesophageal or gastric varices, persistent jaundice. NOTE: Stable non cirrhotic chronic liver disease (including Gilbert's syndrome, asymptomatic gallstones, and chronic stable hepatitis B or C) is acceptable if participant otherwise meets entry criteria.
Cardiovascular: Participants who have severe or clinically significant cardiovascular disease uncontrolled with standard treatment.
Vasculitis: Participants with current diagnosis of vasculitis. Participants with high clinical suspicion of vasculitis at Screening will be evaluated and current vasculitis must be excluded prior to randomization.
Eosinophilia of unknown significance: Hypereosinophila with no clinical symptoms and/or proof of organ dysfunction.
Clinical diagnosis of eosinophilic granulomatosis with polyangiitis (EGPA).

Calendario

(Última actualización: 17/07/2026)

Autorización	Inicio de Ensayo	Inclusión Primer Paciente	Interrumpido	Reiniciado
03/08/2022	01/09/2022	26/04/2024	No aportado	No aportado

Fin de reclutamiento	Fin prematuro (España)	Fin prematuro (Global)	Fin del ensayo en España	Fin del ensayo global
No aportado	No aportado	No aportado	No aportado	No aportado

Promotor

Glaxosmithkline Research & Development Limited United Kingdom

G S K House980 Great West Road

Contact Person

EU GSK Clinical Trials Call Center

+442089904466

GSKClinicalSupportHD@gsk.com

Monetary support: N/A

Tipo de promotor: Comercial

Ceim

CEIm Hospital Clinic de Barcelona

Villarroel, 170 - Planta 0 - Puerta 6b 08036 Barcelona

ceic@clinic.cat

932275766

Centros

No iniciado (03/08/2022)

Complejo Asistencial Universitario De Salamanca

Salamanca

SALAMANCA

No iniciado (03/08/2022)

HOSPITAL CLINIC DE BARCELONA

Barcelona

BARCELONA

No iniciado (03/08/2022)

HOSPITAL UNIVERSITARIO INFANTA LEONOR

Madrid

MADRID

No iniciado (03/08/2022)

HOSPITAL UNIVERSITARIO MIGUEL SERVET

Zaragoza

ZARAGOZA

No iniciado (--/--/----)

Hospital Universitario Quironsalud Madrid

Pozuelo De Alarcon

MADRID

Hematology

No iniciado (--/--/----)

Hospital Universitario Virgen De Las Nieves

Granada

GRANADA

Hematology

No iniciado (--/--/----)

Hospital Universitario Y Politecnico La Fe

Valencia

VALENCIA

Hematology

Medicamentos

PRD5046670
SOLUTION FOR INJECTION
SUBCUTANEOUS USE

-

Principios Activos: N/A

Experimental

PREDNISOLONE
TABLET
ORAL USE

-

Principios Activos: N/A

Experimental

Sin resultados

A study to Investigate the efficacy and safety of Depemokimab compared with placebo in Adults with Hypereosinophilic Syndrome (HES)

State	**Type of participants**	**Age Ranges**
Recruiting	Not provided	Older than 64 , Adults (18-64 years)
Gender	**Phases**	**Expected Participants**
Both	Phase III	84
Results	**Low level of intervention**	**Rare disease**
No results	No	Yes
Geographic coverage	**Areas of the study**	**Advanced therapy**
Undetermined	treatment, safety, effectiveness, pharmacokinetics, pharmacodynamics, pharmacogenetics, pharmacogenomics	NO

Information

Identifier
2023-510346-25-00 (CTIS)

Protocol Code
217013

Transitioned 2021-005692-39

Therapeutic area
Diseases [C] - Hemic and Lymphatic Diseases [C15]|

Investigated Disease
Hypereosinophilic Syndrome (HES)

Scientific Title
A Randomized, Double-blind, Placebo-controlled Study to Investigate the Efficacy and Safety of Depemokimab in Adults with Hypereosinophilic Syndrome (HES)

Rationale

Not provided

Main Objective

To evaluate the efficacy of depemokimab subcutaneous (SC) versus placebo in participants with uncontrolled HES receiving standard of care (SoC)

Primary Endpoints

Frequency of HES flares during the 52-week study intervention period

Temporary moments of secondary assessment

Not provided

Secondary Objective

To assess supportive evidence of the efficacy of depemokimab SC versus placebo on multiple clinical outcomes in participants with uncontrolled HES receiving SoC

Secondary Endpoints

Time to first HES flare (days)
At least one HES flare during the 52-week study intervention period
Change from Baseline to Week 52 in Brief Fatigue Inventory (BFI) item 3 weekly average score.
Change from Baseline to Week 24 in Patient Reported Outcomes Measurement Information System (PROMIS) Fatigue Short Form (SF) 7a score

Temporary moments of secondary assessment

Not provided

Inclusion criteria

Participant must be 18 years of age, at the time of signing the informed consent. Participants who are 40 kg at Screening Visit 1. Participants who have a documented diagnosis of HES prior to Visit 2. HES diagnosis is based on: blood eosinophilia of >1,500 eosinophils/L on at least 2 occasions at 1 month interval, without a discernible non haematological secondary cause, and signs or symptoms of organ involvement and/or dysfunction that can be

directly related to eosinophilia Flare history: A history of 2 or more HES flares within the past 12 months prior to Visit 1. Historical HES flares are defined as documented HES-related worsening of clinical symptoms or blood eosinophil counts requiring an addition or escalation in OCS or cytotoxic/immunosuppressive therapy. At least 1 HES flare within the past 12 months must not be related to a decrease in HES therapy during the 4 weeks prior to the flare. Male or female participants A female participant is eligible to participate if she is not pregnant or breastfeeding, and one of the following conditions applies: Is a woman of non-childbearing potential (WONCBP) as defined in protocol Section 10.4, Appendix 4 OR Is a woman of childbearing potential (WOCBP) and using a contraceptive method that is highly effective, with a failure rate of <1%, as described in, Section 10.4, Appendix 4, from at least 14 days prior to the first dose of study intervention until at least 30 weeks after the last administered dose of study intervention. The Investigator should evaluate the potential for contraceptive method failure (e.g., noncompliance, recently initiated) in relationship to the first dose of study intervention. Capable of giving signed informed consent as described in protocol Section 10.1 which includes compliance with the requirements and restrictions listed in the ICF and in this protocol.

Exclusion criteria

HES disease manifestations which in the opinion of the Investigator may put the participant at unacceptable risk from study participation or confound interpretation of efficacy or safety data. Specific consideration should be given to the participant's ability to comply with protocol requirements, including the list of prohibited therapies; exclusion criteria no. 13 - 16.
COVID-19: Participants that, according to the Investigator's medical judgment, are likely to have active COVID-19 infection should be excluded. Participants with known COVID-19 positive contacts within the past 14 days must be excluded for at least 14 days following the exposure during which the participant must remain symptom-free.
Other concurrent medical conditions that may affect the participant's safety: Participants who have known, pre-existing, clinically significant endocrine, autoimmune, metabolic, neurological, renal, gastrointestinal, hepatic, haematological, respiratory, cardiac or any other system abnormalities that are not associated with HES and are uncontrolled with standard treatment.
Hypersensitivity: Participants with an allergy/ intolerance to a monoclonal antibody or biologic, or any of the excipients of the investigational product in protocol Section 6.1.
Monoclonal antibodies (mAb) targeting IL-5/5R: Participants who have a previous documented failure with anti-IL-5/5R therapy, based on investigator's discretion.
mAbs: Participants who have received mAb within 30 days or 5 halflives, whichever is longer, prior to Visit 1 (other than approved mAbs for the treatment of COVID-19). If a participant has been treated with and responsive to biologics for HES, the participant should not stop the treatment for study eligibility purpose.
Non oral systemic corticosteroids: Participants who have received intravenous, intramuscular, or subcutaneous corticosteroids within 4- weeks prior to Visit 2.
Investigational medications/clinical study: Participants who have received treatment with an investigational agent within 30 days or 5 drug half-lives whichever is longer, prior to Visit 1. The term "investigational" applies to any drug not approved for sale in the country in which it is being used or investigational formulations of marketed products. Participants who are currently participating in any other interventional clinical study.
FIP1L1-PDGFR Status: Participants who test positive for the FIP1L1-PDGFR fusion gene (i.e., participants with the myeloid-variant HES are excluded). Blood sampling is required for all participants at Screening (Visit 1) for this test unless the documented result is available.
ECG Assessment: QTcF 450 msec or QTcF 480 msec for participants with Bundle Branch Block at Screening Visit 1.
OCS responsiveness: Participants who are not responsive to OCS based on clinical response or blood eosinophil counts in the opinion of the Investigator.
Infection: Participants with chronic or ongoing active infections requiring systemic treatment. Participants with a pre-existing parasitic infestation within 6 months prior to Visit 1.
Alcohol/Substance Abuse
Pregnancy
Participants who have known evidence of lack of adherence to controller medications and/or ability to follow physicians recommendations.
Immunodeficiency: Participants with a known immunodeficiency (e.g., HIV), other than that explained by the use of oral corticosteroid (OCS) or other therapy taken for HES.
Malignancy: Participants with a history of or current lymphoma. Participants with current malignancy or previous

history of cancer in remission for less than 5 years prior to Visit 1. Participants that had localized carcinoma (i.e., basal or squamous cell) of the skin which was resected for cure will not be excluded. Participants with a haematologic malignancy with hypereosinophilia in which HES is not the primary diagnosis, e.g., chronic myeloid leukaemia, myelodysplastic syndrome, chronic eosinophilic leukaemia-not otherwise specified.
Liver disease: Cirrhosis or current unstable liver or biliary disease per Investigator assessment defined by the presence of ascites, encephalopathy, coagulopathy, hypoalbuminaemia, oesophageal or gastric varices, persistent jaundice. NOTE: Stable non cirrhotic chronic liver disease (including Gilbert's syndrome, asymptomatic gallstones, and chronic stable hepatitis B or C) is acceptable if participant otherwise meets entry criteria.
Cardiovascular: Participants who have severe or clinically significant cardiovascular disease uncontrolled with standard treatment.
Vasculitis: Participants with current diagnosis of vasculitis. Participants with high clinical suspicion of vasculitis at Screening will be evaluated and current vasculitis must be excluded prior to randomization.
Eosinophilia of unknown significance: Hypereosinophila with no clinical symptoms and/or proof of organ dysfunction.
Clinical diagnosis of eosinophilic granulomatosis with polyangiitis (EGPA).

Calendar

(Last Update: 17/07/2026)

Authorization	Start of Trial	First patient inclusion	Halted	Restarted
03/08/2022	01/09/2022	26/04/2024	Not aported	Not aported

End of recruitment	Premature end (Spain)	Premature End (Global)	Trial end (Spain)	Trial end (Global)
Not aported	Not aported	Not aported	Not aported	Not aported

Sponsor

Glaxosmithkline Research & Development Limited United Kingdom

G S K House980 Great West Road

Contact Person

EU GSK Clinical Trials Call Center

+442089904466

GSKClinicalSupportHD@gsk.com

Monetary support: N/A

Sponsor type: Commercial

Ceim

CEIm Hospital Clinic de Barcelona

Villarroel, 170 - Planta 0 - Puerta 6b 08036 Barcelona

ceic@clinic.cat

932275766

Sites

not initialized (03/08/2022)

Complejo Asistencial Universitario De Salamanca

Salamanca

SALAMANCA

not initialized (03/08/2022)

HOSPITAL CLINIC DE BARCELONA

Barcelona

BARCELONA

not initialized (03/08/2022)

HOSPITAL UNIVERSITARIO INFANTA LEONOR

Madrid

MADRID

not initialized (03/08/2022)

HOSPITAL UNIVERSITARIO MIGUEL SERVET

Zaragoza

ZARAGOZA

not initialized (--/--/----)

Hospital Universitario Quironsalud Madrid

Pozuelo De Alarcon

MADRID

Hematology

not initialized (--/--/----)

Hospital Universitario Virgen De Las Nieves

Granada

GRANADA

Hematology

not initialized (--/--/----)

Hospital Universitario Y Politecnico La Fe

Valencia

VALENCIA

Hematology

Medication

PRD5046670
SOLUTION FOR INJECTION
SUBCUTANEOUS USE

-

Active Principles: N/A

Experimental

PREDNISOLONE
TABLET
ORAL USE

-

Active Principles: N/A

Experimental

No results